								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2003 10 717, 747												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS*								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7_7_ minus 20=		• 2			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			6 minus 3 =		· 3			X43=		OR	X86=	258
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+145=		OR	+290=	مدي
• 11	the difference	in column 1 is	less than zero, enter "0" in column 2				ļ	TOTAL		OR	TOTAL	1.064
CLAIMS AS AMENDED - PART II										, 0	OTHER	
	· · · ·	(Column 1)		(Column 2). (Column 3)				SMALL ENTITY		OR	SMALL	
Y.		REMAINING NI		HIGH NUME PREVIO	BER	PRESENT		RATE	ADDI- TIONAL	7	RATE	ADDI- TIONAL
EN		AMENDMENT		PAID		EXTRA		TORTE	FEE			FEE
AMENDMENT	Total	• 57	Minus	- 2	<u> </u>	•		X\$ 9=		OR	X\$18=	
AME	Independent	· 6	Minus	(3		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
03 13/07 (Column 1) (Column 2) (Column 3)							ı	TOTAL			TOTAL	
							•	ADDIT. FEE	L	OR	ADDIT. FEE	L
		CLAIMS		HIGH	EST	(Column 3)	ı		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER		PREVIO	USLY	PRESENT EXTRA		RATE.	TIONAL		RATE	TIONAL
	7-0-1	AMENDMENT	10100	PAID I	FOR ろ		lŀ		FEE			FEE
	Total Independent	· de	Minus Minus	** 20	<u> </u>	•		X\$ 9=		OR	X\$18=	
AM		NTATION OF MIL			CLAIM	┸		X43=		OR	X86=	
							'	+145=		OR	+290=	
•								TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
U	`	CLAIMS REMAINING		HIGH	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI-		RATE	ADDI-
AMENDMENT C		AFTER AMENOMENT	·	PREVIO					TIONAL FEE			TIONAL FEE
NO.	Total	•	Minus	**		= .	l	X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus .	***		3	▎┟	X43=	· ·		X86=	-
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 			OR	AU0-	
								+145=		OR	+290=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE OR ADDIT. FEE												
		mber Previously Paid ber Previously Paid					r foui	nd in the app	roprizte box	in cot	umn 1.	